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DATES AND SOCIETY								iplication or Docket Number					
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CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL! YPE	MAL	_		RAHT R	
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l i	ULTIPLE DEPE	DODIT CLAIM P				-	X40-	160		X250-			
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* If the difference in column 1 is less than zero, enter "O" in column 2							1	TOTAL	TAIX	Z on	TOTAL		
CLAIMS AS AMENDED - PART (I (Column 1) (Column 2) (Column 3)									- 70			THAN	
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